SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				FAGE		10	OF		110	
(check only one)										
X	11a		11b		11c		11	d		
	12		13a		13b		14			15

		e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) Dr. Raul Ruiz for Congress								
_	Full Name (Last, First, Middle Initial) Stephanie M. Dulac	Date of Receipt							
A.	Mailing Address 2919 Golden Ave Apt 1A	Date of Receipt 03 29 2013							
	City	State Zip Code	Transaction ID : C8711564						
	Bronx	NY 10489							
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period						
	Name of Employer	Occupation	700.00						
	Corinthian Medical	Administrator							
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date							
_	Full Name (Last, First, Middle Initial) Juan T. Estevez		Date of Receipt						
B.	Mailing Address 40 Memorial Hwy., Apt. 22D		03 28 2013						
	City New Rochelle	State Zip Code NY 10801	Transaction ID : C8710937						
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period						
	Name of Employer	Occupation	2500.00						
	Self	Physician							
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 2500.00							
<u> </u>	Full Name (Last, First, Middle Initial) Barbara M. Field	Date of Receipt							
Ο.	Mailing Address 22 Dana St		03 13 2013						
	City Brookline	State Zip Code MA 02445-6847	Transaction ID : C8705839						
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period						
	Name of Employer N/A	Occupation Retired	2500.00						
	Receipt For: 2014	Election Cycle-to-Date							
	Primary General Other (specify)	2500.00							
Г	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		5700.00						